DOCUMENT	#	7	1	8995
<ol> <li>Entity Name</li> </ol>	4		^-	7

EMERALD TOWER ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1401 SOUTH OCEAN BLVD POMPAMO BEACH FL 33062

1401 SOUTH OCEAN BLVD POMPAMO BEACH FL 33062

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

DO NOT WRITE IN THIS SPACE

Applied For

		Ony a clase		59-1419717	Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6	6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent			red Agent	
RUMIN, EDWARD 2500 NORTH FEDERAL HWY. # 201 FT. LAUDERDALE FL 33310-6057		Name Street Addr	ess (P.O. Box Number is Not Acceptable)		
		City		FL Zip Code	

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

4. FEI Number

Make Check Payable to Department of State

			100	
10.	OFFICERS AND DIRECTOR	s ,	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	10
TITLE	P	Delete	TITLE V P .	Addition
NAME	WILSON, JOHN		NAME TERZICH Joek STREET ADDRESS 4401 South Ocean Blud.	
STREET ADDRESS	1401 S OCEAN BLVD		Office Tablication	İ
CITY-ST-ZIP	POMPANO BEACH FL	•	CITY-ST-ZIP POMPANO Beach, FL 33062	
TITLE	S	Delete	TITLE S Sanchez Jo ANNE Change	Addition
NAME	FEIGENBAUN, IRWIN		NAME 1401 South Ocean Blud.	
STREET ADDRESS	1401 SOUTH OCEAN BLVD.		STREET ADDRESS O	
CITY-ST-ZIP	POMPANO BEACH FL	,	CITY-ST-ZIP FOMPANO BEACH PZ 33062	_
TITLE	Τ	Delete	TITLE T ROSS ALAN Change	Addition
NAME	PETERSON, LINDA		NAME 1401 South Ocean Block	
STREET ADDRESS	1401 S OCEAN BLVD		STREET ADDRESS Pompano Beach FL.	
CITY-ST-ZIP	POMPANO BEACH FL		CITY-ST-ZIP 16 YICHOLOS PCCCIT, 33 262	2_
TITLE	VP	☐ Delete	TITLE PRESident . Dichange	Addition
NAME	THOMAS, NAOMI		NAME STREET ADDRESS 140   South Ocean Blud.	
STREET ADDRESS	1401 SOUTH OCEAN BLVD.		STREET ADDRESS 140   South Ocean 510a.	
CITY-ST-ZIP	POMPANO BEACH FL		CITY-ST-ZIP POMPANO Beach FL 3306	2_
TITLE	D	Delete	THILE D. Strickinger Frank Change	<b>Addition</b>
NAME	RABIN, SHELDON		NAME STREET ADDRESS 1401 South Occur Blod.	
STREET ADDRESS	1401 S. OCEAN BLVD.		STREET ADDRESS PORT SOUTH OF THE STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL		CITY-ST-ZIP Rompano Beach, FL 33062	,
TITLE	D	☐ Delete	TITLE D. JORDAN, MIKE Change	Addition
NAME	STOCKINGER, FRANK		NAME Was South Ocean Blad	
STREET ADDRESS	1401 S. OCEAN BLVD.		STREET ADDRESS 1401 South Ocean Blud. CITY-ST-ZIP POMPANO Beach, FL	
CITY-ST-ZIP	POMPANO BEACH FL		CITY-ST-ZIP to mpand Deach, FL 3306	52

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.